IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Hunt, Thomas

Title:

MEDIA STORAGE SYSTEM AND METHOD

Appl. No.:

Filina Date:

Examiner:

Art Unit:

CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, Washington, D.C. 20231.

EO 901 100 852 US xpress Mail Label Number)

UTILITY PATENT APPLICATION TRANSMITTAL LETTER

MAIL STOP PATENT APPLICATION Commissioner for Patents PO BOX 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

> Thomas Hunt 7002 Via del Charro Rancho Santa Fe. CA 92067

Thomas E. Veloskev 793 Pebble Beach Drive San Marcos, CA 92069

Robert Bruce O'Neill 3320 Dorado Place Carlsbad, CA 92009

X Applicant claims small entity status under 37 CFR 1.27.

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	Enclos	ed are:							
	Enclosed are:								
[Specification, Claim(s), and Abstract (28 pages).								
[✓ Formal drawings (∑ b sheets, Figures 1 - 2 1/4). ✓ Declaration and Power of Attorney (4 pages). ✓ Assignment of the invention to Spectrum Concepts, Inc. 								
{									
[
[Assignment Recordation Cover Sheet.								
[Small Entity statement.								
(Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).							
[☐ Information Disclosure Statement with copies of listed reference(
ĺ	Application Data Sheet (37 CFR 1.76) (4 pgs.).								
The filir	ng fee	is calculate	d below:						
		Claims	Included in	Extra				Fee	
Posi	ic Fee	as Filed	Basic Fee	Claims		Rate \$750.00		Totals \$750.00	
	l Claim	s: 42	- 20 =	22	x	\$18.00		\$396.00	
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			Claim(s) present:		^	\$280.00	= :	\$0.00	
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				тот	AL F	FILING FEE:	= -	\$741.00	
	A check in the amount of \$				to cover the filing fee is enclosed.				
	Please	se charge the filing fee of \$ to the deposit account 5026						count 502635.	
	Please charge the filing fee of \$741.00 pursuant to the attached Credit Card Payment form.								
i 6 (The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 502635. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 502635.								

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Bernard L. Kleinke Attorney for Applicant

Registration No. 22,123

Date July 10, 2003

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